

## EXHIBIT 19

DO NOT USE THIS FORM TO REPORT: CRIME CLASSIC CHANGES, CASE CLEARANCES, INITIAL ARREST ON THE COMPLETED PROPERTY, ADDITIONAL STOLEN PROPERTY  
SERIAL NUMBER STAINED FOR PROPERTY PREVIOUSLY REPORTED. CRIME INCIDENT DATA, USE COMPLAINT FOLLOW-UP.  
1) TO REPORT THE PRECEDING.

PLAINT - FOLLOW UP INFORMATIONAL FD 313-081A (Rev. 4-89-31)												PAGE <u>      </u> OF <u>      </u> PAGE		
Crime <b>HOMICIDE #2</b>				Pct. <b>043</b>	OCCB No.	Complaint No. <b>2412</b>	Date of This Report <b>4/7/01</b>	14 PERP 1						
Date of Orig. Report <b>2/12</b>	Date Assigned <b>2/12</b>	Case No. <b>624</b>	Unit Reporting <b>43 PDS</b>				Follow-Up No. <b>07</b>	PERP 2						
Complainant's Name - Last, First, M.I. <b>PSNY FOR ACOSTA, ALBERT</b>				Victim's Name - If Different										
Last Name, First, M.I.				Address, Include City, State, Zip				Apt. No.			15 PERP 1			
Home Telephone		Business Telephone		Position / Relationship		Sex	Race	Date of Birth		Age	PERP 2			
Total No of Perpetrators		Wanted	Arrested	Weapon	Describe Weapon (If firearm, give color, make, caliber, type, model, etc.)									
		<input type="checkbox"/> Used	<input type="checkbox"/> Possessed											
Perpetrators Perp No 1	Wanted	Arrested	Last Name, First, M.I.		Address, Include City, State, Zip						Apt. No	Res. Pct.		
	<input type="checkbox"/>	<input type="checkbox"/>												
Perp No 2	Sex	Race	Date of Birth	Age	Height	Fl	In	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No.	
	<input type="checkbox"/> Eyeglasses	<input type="checkbox"/> Sunglasses	Clothing Description.											
Nickname, First Name, Alias		Scars, Marks, M.O., Etc.										(Continue In "Details")		
Perp No 3	Wanted	Arrested	Last Name, First, M.I.		Address, Include City, State, Zip						Apt. No	Res. Pct.		
	<input type="checkbox"/>	<input type="checkbox"/>												
Perp No 4	Sex	Race	Date of Birth	Age	Height	Fl	In	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No.	
	<input type="checkbox"/> Eyeglasses	<input type="checkbox"/> Sunglasses	Clothing Description.											
Nickname, First Name, Alias		Scars, Marks, M.O., Etc.										(Continue In "Details")		
AREA WITHIN BOX FOR DETECTIVE / LATENT FINGERPRINT OFFICER ONLY. THIS BOX WILL BE UTILIZED BY INVESTIGATOR WHENEVER POSSIBLE AND MUST BE FULLY COMPLETED WHEN USING THIS FORM TO CLOSE A CASE "NO RESULTS."												16 CHOICE 1		
Comp. Interviewed <input type="checkbox"/> Yes <input type="checkbox"/> No		In Person <input type="checkbox"/>	By Phone <input type="checkbox"/>	Date	Time	Results: Same as Comp. Report - Different (Explain in Details)						<input type="checkbox"/> <input type="checkbox"/>	CHOICE 2	
Witness Interviewed <input type="checkbox"/> Yes <input type="checkbox"/> No		In Person <input type="checkbox"/>	By Phone <input type="checkbox"/>	Date	Time	Results: Same as Comp. Report - Different (Explain in Details)						<input type="checkbox"/> <input type="checkbox"/>		
Canvass Conducted <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes - Make Entry in Body Re: Time, Date, Names, Addresses, Results				Crime Scene Visited <input type="checkbox"/> Yes <input type="checkbox"/> No						If Yes - Make Entry in Details Re: Time, Date, Evidence Obtained		17 CHOICE 1
Complainant Viewed Photos <input type="checkbox"/> Yes <input type="checkbox"/> Refused <input type="checkbox"/> Future		Results:												CHOICE 2
Witness Viewed Photos <input type="checkbox"/> Yes <input type="checkbox"/> Refused <input type="checkbox"/> Future		Results:												20 PERP 1
Crime Scene Dusted <input type="checkbox"/> Yes <input type="checkbox"/> No		By (Enter Results in Details)				Crime Scene Photos <input type="checkbox"/> Yes <input type="checkbox"/> No		By (Enter Results in Details)						PERP 2
If Closing Case "No Results," Check Appropriate Box and State Justification in Details: <input type="checkbox"/> C-1 Improper Referral <input type="checkbox"/> C-2 Inaccurate Facts <input type="checkbox"/> C-3 No Evidence / Can't ID <input type="checkbox"/> C-4 Uncooperative Complainant <input type="checkbox"/> C-5 "Leads" Exhausted												21 PERP 1		
DETAILS:												PERP 2		
Investigate: <b>HOMICIDE #2</b>												22 PERP 1		
Subject: <b>INTERVIEW MARK A DAMON</b>												PERP 2		
<p>1. On April 5, 2001, at approx. 1645 hrs., the u/s was present at ADA Christine Scaccia's office (Bronx Criminal Court) and Mark A Damon DOB:01/10/84 17 yrs old residing at 1491 Metropolitan Ave Tel#718-597-3519 was interviewed. Mark stated with permission from aka Murdoch he sold a .22 cal auto hand gun to a security guard back on January 2001. He sold it for \$75.00 USC. He stated the guard was a male white/Italian, heavy set with a thick mustache.</p> <p>2. During the above interview the following person were present:  * Det Derrick Parker GIU  * ADA Scaccia  * Terrance Alston AKA Murdoch</p> <p>3. Case active.</p>												23 PERP 1		
<i>JUNNY SMITH RESIDES AT HOME ADDRESS</i>												PERP 2		
ACTIVE <input type="checkbox"/> CLOSED				DATE REVIEWED / CLOSED				IF ACTIVE, DATE OF NEXT REVIEW				24 PERP 1		
PORTING ICER		RANK Det	SIGNATURE		NAME PRINTED <i>Luis R. Agostini</i>		TAX REG NO 889648		COMMAND 043		PERP 2			
VIEWING / CLOSING		CASE	ENTER DESIGNATION		SIGNATURE									